PTO/SS/05 (08-03)
Approved for use through 7/31/2006, OMB 0651-0032

	PA	TENT APPLICA	TION FE	F DETE	red to respo	nd to a code	ction of i	Mormation y	niess it dis	. DEPARTMENT Plays a valid OM	OF COMMEN	
			APPLICATION FEE DETERMINATIO Substitute for Form PTO-875				ON RECORD			Attached or necest Wamper		
	CLAIMS AS FILED - PART I									04 698	400	
	(Column 1) (Column 2)						SMALL ENTITY			OTHER THAN		
ı	FOR	NUMBER	EN ED			7 —		CHILIT	OR	SMA	LL ENTITY	
	BASIC FEE (37 CFR 1.16(a))		are 1	NUMBE	REXTRA	4 1-4	ME	FEE	ŀ	RATE		
	TOTAL CLAIMS		· · · ·				•	,	7		FEE	
	D7 CFR 1.18(d)	7/-	nus 20 +			7 🗔		 	OR	}	 	
L	(37 CFR 1.16(b))		nes 3 v ·			┪┝╩	=-	├ -	- oe	X 5 2		
	MILTIPLE OFFICERS					 ┨╏		<u> </u>	_ br	- ×s	1	
ŀ							. `-		OR		 	
- 1	. If the difference in c	olumn 1 is less than 20	uo' eusei. D. P	1 column 2					┨ ̄			
- [T	TAL		OR	TOTAL	L	
- 1	Ci	AIMS AS AMEN	DED - PAR	IT II								
L		(Column 1)	(Col	umo 2)								
	4	CLAIMS	HIGH		(Column 3)	, <u> </u>	MALLE	MTITY	OR -	SMALL	R THAN ENTITY	
·	티	REMAINING AFTER		BER	PRESENT	R	TE	ADDs	1.			
M	Total	AMENDMENT	PAID	FOR	EXTRA	11		TIONAL	•	RATE	AODI- TIONAL	
D	O (3) CES 1740	27	NAS "	27		1		FEE	1 .	<u> </u>	FEE	
	Z Independent III (37 CFR 1,14pg)	- Ne	148	*		× 5_			OR	X 5 •	_ ·	
- 1	E FIRST POSSESSA	700105			<u> </u>	7.5_	:_		OR	X 2 .		
-	·	TION OF MULTIPLE DEP	BADENT CLAIM	(37CFR1	.16(නු)	+5	.		OR			
						TOTAL			UK	TOTAL		
- 11	10(19/66	(Column 1)				ADDL	FEE [OR	ADOL FEE		
	9	CLAIMS	HIGH	mn 2) (C	Column 3)							
		REMAINING AFTER	NUME	3ER -∣P	RESENT	RAT	ė T	ADDÍ	•			
Į	Total	AMENDMENT	PREVIO PAID I	OR	EXTRA		٦	TIONAL		RATE	-ADDI- TIONAL	
ع ا	D COLUMNS	31 1	2	7 1-	4	 	-+	FEE	ŀ		FEE	
ű	Independent Of CFR 1.6000	5 Minu	· - Z	-		1	╍┼		OR	X 8 e	200	
3			<u> </u>	<u>'</u>		X S	<u>•</u>	ľ	OR	X \$_ =		
\vdash	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						·. T					
1,	11.				,	TOTAL	_		OR	TOTAL		
15	11677	(Column 1)				ADDL F	Œ.L		OR	ADD'L FEE	<i>20</i> n	
U		CLAIMS	(Colum HiGHE		olumna 3)					•	-	
Į		REMAINING AFTER	MUMBE	ÐR Í PR	ESENT	RATE			· F			
u	I A	MENDMENT	PREVIOU PAID FO	ISLY E	XTRA	1		ADDI-	ı	RATE	ADDI- TIONAL	
ă	(3) CPR 1.14(c)	Sol Minus	7	1	7	—	┯	FEE /	L		FEE	
ENDM	(27 CFR 1,180m	Minus	 (2)	- -	'	<u> </u>		$-\Delta$	OR:	(<u></u>	5	
Į₹			└		EI.	X S	•	/ 1	OR I			
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(0))						T	7-1	F			
W.	1/61/3	72612	ジス			TOTAL	╄-	/ -		-		
• /	If the entry in colum	n I is less then the ent	Y In column 2	. wise :0" =	1 COLUMN 7	ADD'L FE	E 📙			OTAL DOLFEE	SUX	
"	The Pachoe Number	Den daniel De de			than 20 ex	ler_"20"	,		• •		4	
This c	ine Highes: Humbe	H Previously David Som	(Total or Inde	ruz e 1865 Dendem) iz	inen ji wale	r 3						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including pathering, preparing, and submitting the completed application form to the USPTO. Time will savy depending upon the individual to take 12 markets to complete, on the amount of time you require to complete this form and/or suggestions for reducing his burden, should be sent to the Chief Information Officer. U.S. Department of Commerce, R.O. Box 1450, Alexandric, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS

If you need assistance in completing the form, cell 1-800-PTC-9198 and select.option 2.